MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT				IND	DEP	IND	DEP	IND	DEP
	IND	DEP	IND	DEP	IND	DEP								
1	1							51						
2		1						52						
3		1						53						
4		3						54						
5		3						55						
6		3						56						
7		3						57						
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44								94						
45								95						
46								96						
47								97						
48								98						
49								99						
50								100						
TOTAL IND.	1							TOTAL IND.						
TOTAL DEP.	20							TOTAL DEP.						
TOTAL CLAIMS	21							TOTAL CLAIMS						